

**HEALTH COMMITTEE
of the
Suffolk County Legislature**

Minutes

A regular meeting of the Health Committee was held in the Rose Y. Caracappa Auditorium in the William Rogers Legislative Building, Veterans Memorial Highway, Smithtown, New York on **October 18, 2001**, at 10:00 a.m.

MEMBERS PRESENT:

Legislator Ginny Fields, Chairman
Legislator Brian Foley, Vice Chairman
Legislator Maxine Postal
Legislator Martin Haley

ALSO IN ATTENDANCE:

Paul Sabatino, Legislative Counsel
Dr. Clare B. Bradley
Nicole DeAngelo, County Executive's Office, I.R.
Bob Maimoni, Suffolk County Department of Health
Mary Skiber, Aide to Legislator Ginny Fields
Chris Reimann, Aide to Presiding Officer Paul Tonna
Jim Dobkowski, Press Secretary to Presiding Officer Paul Tonna
Terence Smith, Dolan Family Health Center - Administrator
Dr. Walter O'Connor, Mental Health Advisory Board
Diane Mercieca, South Fork Community Health
Shirley Morrison, Advisory Board, Riverhead Health Center
Patricia Orzano
Dolores Thompson, Dolan Family Health Center
Jay Zuckerman, Southside Hospital
Bob Vanson
Robert Cicale
AnnMarie Carbonetto, Health Department
All Interested Parties

Minutes taken and transcribed by Irene Kulesa, Legislative Secretary

(The meeting came to order at 10:15 a.m.)

CHAIRPERSON FIELDS:

We will begin the Health Committee with the Pledge of Allegiance led by Legislator Haley.

SALUTATION

CHAIRPERSON FIELDS:

Good morning. We have six cards and we'll begin with Doctor Walter O'Connor.

DR. O'CONNOR:

May I suggest to the committee that the --

CHAIRPERSON FIELDS:

Is that you? Okay, Walter -- Doctor Walter O'Connor, Shirley Morrison, Diane Mercieca. So you're not going to be part of that? Patricia Orzano is separate. Dolores Thompson, separate or together and I think, Jay Zuckerman is separate. Okay, good morning. Welcome back.

DR. O'CONNOR:

Do you want to hear from us? Okay. My name is Doctor Walter J. O'Connor and I'm here on behalf of the Martin Luther King Health Center, a Community Advisory Board and also on behalf of Marilyn Shellabarger who is in Australia right now. She planned her trip many months ago. I sacrificed myself and volunteered to go in her place, so she could show up here. She graciously rejected my offer.

And I also wanted to speak on behalf of Elsie Owens, whom you all know a person of community rights. Elsie had planned to be here but her Doctor said Elsie you can't go. You right now are ill and I believe not too seriously but he vetoed her coming here. So that's, I think, takes care of those two considerations. I just have this and my vision is poor but I just have an outline. I am going to speak on behalf of the Martin Luther King Health Center but mostly as a voice of Marilyn Shellabarger, who cannot be here, as I mentioned and so hopefully, her voice will be heard and I can do honor to it.

The a -- I think, it's important that we understand that the Health Centers Program began in 1967. It began as a concept sponsored by Doctor George Leone, then Commissioner of Health, by Mr. Ed Peterson who is the CEO of Good Samaritan Hospital, now called Good Samaritan Hospital Medical Center, the EOC and the Wyandanch Community leaders. It was identified as an area, one of twelve needing great attention, so far as medical needs were concerned. The concept was crystallized and it came into reality in July 1st, of 1968 and from there grew the Health Center Complex that we now have. And all of these Health Centers are located in what had been identified in '67 and '66 as being areas of depressed financially and deprived of adequate health care. And so, I think, this is a system that is so unique, it has not been duplicated anywhere in the State. As a matter of fact, I think, I'm told that the Health Department of the State thinks that perhaps this is not public health, this is really taking care of people, tough something or other. I don't want to say it. And it's also unique that there's probably nowhere in the country that the complex of hospital community and government have gotten together to render patient care to the needy and the medically uninsured. I think that's very important to remember.

I think the Health Centers have done such a wonderful job of providing this care to people who would never, never be able to get the care. The Emergency Room used to be the place where the needy went for their health care and they could wait six or seven hours before they got this episodic care, hardly very compassionate and then were sent home to find out what to do in the follow-up on your own. The Health Centers have substituted all of that for care, that's quality, that's continuous, that's compassionate and I just think they doing a wonderful job. But we have a problem now and well we've always had a problem, many challenges in the past, where people wanted to get rid of the Health Centers and people wanted to cut the budgets of Health Centers and fortunately, the Legislature and the Executive Officers of this County, in their wisdom, have seen that this was just a foolish endeavor and have just pushed aside such suggestions.

I think now, we're worried at the Health -- and I speak now for all the Health Centers. We're worried about the impact that the budget will have on the operations of the Health Centers. We've heard anything from minus 4 percent operating budget for the next year to no growth and now apparently a 2 percent growth in the budget for 2002. A 2 percent budget will probably not -- I say probably, I'm sure will not take care of the inflationary needs alone of the Health Centers and so this has to be looked at very carefully. And then on top of that, we have an economic downturn and the economic downturn is hurting and will hurt and make worse the plight of the financially depressed areas of this County. And unemployment will go up because they're all low paying, not all, but many of them are low paying salaries, jobs which can be eliminated by the small businessman. Many of them have no health insurance and people who did have health insurance in employment, now that they're unemployed, have no health insurance. And so I think that instead of, you know things improving the way it was, you know in the '90's, everything was rosy. Things will get worse and this will increase the patient load and patient needs at the Health Centers and I think this has to be taken into consideration.

You know, down in Washington, they were not going to spend any money, now they're exploding with -- of how they're going to spend money and part of it probably on senseless projects. But I think this is a project that needs to be taken into special consideration. That 2 percent is probably not going to take care of the needs of the Health Centers and so rather than -- no what it's going to do, it's going to cause a decrease in health services because there will not be available resources to expand them and that's what we really need.

Now, I think there are others on the panel here who want to speak specifically to their Health Center's needs. I should mention though that we do have, for instance, Bay Shore, which is now out of existence, not by its own volition but because I guess they got a smelly Health Center and they had to close it. That needs attention also and with this, I will turn it over to, I guess, Shirley will be the next.

CHAIRPERSON FIELDS:

Thank you Doctor O'Connor and thanks for being an advocate for the -- thanks for being an advocate and such a good one for the Health Centers. I have personally toured each and every one of them with Doctor Bradley. And having worked in private medical practices for 37 years before I did this, seeing many private physicians' offices and hospitals and clinics, I was absolutely impressed with the Health Centers that we offer to the citizens of Suffolk County. And so speaking to me is speaking to the choir and I believe that the rest of the people on this panel would agree with that, for those who have personally toured those Health Centers also. So thank you again. Just state your name for the record please?

MS. MORRISON:

Shirley Morrison for the Riverhead Advisory Board. This committee has been very supportive of the Health Centers. So you must wonder why we're never satisfied and why we're always asking for more. And the reason is very simple; it's because the increase in personnel never keeps up with the increase in the visits. This year, our primary concern is three new positions, Medical Assistant, Registered Nurse and Health Program Analyst. These positions are crucial for operating the center and taking them out of the budget would only save pennies for the individual taxpayer. We're also concerned about a registered nurse position that was approved in the last budget but never released. It's more crucial than ever that this position stay in the budget, because two nurses will be retiring soon and as you all know, it takes forever to fill vacated Civil Service Positions.

Just to give you the flavor of what it's like to work in Riverhead. There are 70 employees in the East End Centers and there's no margin in the budget for vacations or sick time. If all 70 employees were on the job then, of course, they never are, all the assignments would be filled. But on a typical day, three may be on vacation, one may be on maternity leave, one may be sick. In other words, the assignments have to be juggled and people have to try to do their own jobs and cover for other people at the same time. This puts a conscientious employee on the edge of panic and increases the chance for error. Working with clients who have multiple social and health problems is demanding enough and adding a constant strain of time pressure can breed frustration and resentment. Somehow, we still expect the staff to maintain high standards and be patient and considerate and somehow they are, judging from the suggestion forms that we get from patients. But I wonder how your staff would like to work under these conditions every day. Working in a clinic shouldn't feel like working in a Mash Unit.

Even if the budget is approved as it stands, patients on the East End are shortchanged in comparison with the rest of the County. For example, access to specialists is more limited. The Greenport and East Hampton Satellites don't have x-ray services and the East Hampton Satellite doesn't have prenatal care. Imagine living in Montauk, being eight months pregnant. You don't have a car. You have to take a bus 30 miles to the Southampton Satellite. You have a three-year-old to take along with you and the weather is terrible. Of course, we're not asking this year for an expansion of X-ray services or prenatal care. I mentioned them only to show that the services on the East End are already limited. So we're asking you, please don't make them any worse.

I'd also like to point out that because the Riverhead Center is not operated under a contract with the hospital, we don't have hospital administrators to advocate for us. So we have to rely on the members of this committee to look out for us. We know you're on the hot seat but we hope you'll meet our requests for this year, which are really quite modest, given the unmet needs of the East End. And because I'm very naive about this process, I don't know how to worry -- to be about these positions I mentioned and when to put my finger in the next time. So may I call your office at some point and say are these in jeopardy and if so, what -- you know who do I talk to? Would that be all right?

CHAIRPERSON FIELDS:

Absolutely.

MS. MORRISON:

Thank you.

CHAIRPERSON FIELDS:

And we'll try to get you as much information anytime that you ask for it.

MS. THOMPSON:

Good morning.

CHAIRPERSON FIELDS:

Just state your name for the record, please?

MS. THOMPSON:

My name is Thompson; I Chair the Advisory Board.

CHAIRPERSON FIELDS:

Can you make sure that your microphone is on and that you're speaking into? There's a little button close to the top right here. Up by your left hand up there. Push it towards you.

MS. THOMPSON:

Oh, okay, I'm so loud, I didn't think I needed it.

CHAIRPERSON FIELDS:

Okay, thank you.

MS. THOMPSON:

I'm Dee Thompson. I Chair the Advisory Board for the Dolan Family Health Center and a Trustee of Huntington Hospital. As you all know the Center is very well received by the community and we have successfully filled the needs of many, many people in our community. Last spring, the Town of Huntington was a finalist in the all America Cities competition in Atlanta and Town Officials asked at a delegation from the Dolan Family Health Center to present our story. As part of what -- this is what -- the reason for it was that we did such a fantastic job that our story was one that was well received by the Atlanta finalist award people.

But I'm here today to alert you to the negative impact, the proposed 2002 Budget will have on the County's Health Care Safety Net for the poor. I'm here also to ask you to please take action in increased funding for all the Health Centers. We all suffer and feel the pain when we're not able to service the people in that community. Let me inform you that on October the 16th, was the sixth anniversary of the Dolan Family Health Center and its partnership with the people of Suffolk County. During this time, we have grown from two thousand, five hundred visits to twenty four thousand visits annually through the support of the Suffolk County Legislature and the Department of Health Services. But also through our reputation of quality service and expert continuity care, which is key to our philosophy of providing primary care to the poor. You have helped us tremendously and we appreciate all of that but we really need more. And we need more why? Because we can constantly get additional people coming to the Center, because believe it or not, even though we've been there now for this amount of time, we're still brand new to many people that have not come to us.

The 2002 proposed budget will cause serious problems for the Dolan Center and for Huntington Hospital. We will not be able to sustain current levels of services in the hours of operation. We already have cut back on Saturdays, we're not open and we have less hours on Thursdays. But however, we have not reduced the number of people served and we know also that takes quite a toll on the people that's rendering the service. In fact, this budget may require us to cut also back five hundred thousand dollars in the expenses from our Health Center's Budget. This would also be a disservice to the community who rely on the Center and this being one of the busiest year the Health Center has had in the six year history. So we are grateful for what you have done for us so far and we know that you will help us to sustain the services that we are also rendering. Thank you so much for listening.

CHAIRPERSON FIELDS:

Thank you. Thank you all for coming. Maybe you'll be back when we go through the budget hearings. Next? Yes?

LEGISLATOR FOLEY:

Just before the panel leaves, to have others step forward, I just want to state for the record that following up on the Doctor's comments, I had distributed a letter dated October 12, to the Legislative Health Committee from Marilyn Shellabarger that Chairperson of the Health Center Liaison Committee. Each of the committee members have a copy of the letter and made one copy also for the stenographer as well. I'm sure Doctor that you have -- if you need copies; we can give them to you after the committee meeting. I just have a question for Ms. Thompson before we -- you mentioned that on Saturday's the Dolan Center is closed? For how long has that been the case?

MS. MORRISON:

Just in the past month.

LEGISLATOR FOLEY:

Past month?

MS. MORRISON:

Yes.

LEGISLATOR FOLEY:

Sundays it's closed as well or --

MS. MORRISON:

That's correct.

LEGISLATOR FOLEY:

Okay and that's due to --

MS. MORRISON:

Budgetary --

LEGISLATOR FOLEY:

Budgetary. Now have you found in the past that Saturday was among the busiest of the days when it was open?

MS. MORRISON:

No, we did not find that the busiest but it was one that naturally people can come in.

LEGISLATOR FOLEY:

Sure because -- particularly working, not just the poor but working class families utilize; usually the weekends to access a variety of services, including health care. We see that particularly in the South Brookhaven Health Centers.

MS. MORRISON:

Yes, that's correct.

LEGISLATOR FOLEY:

Okay. As far as Riverhead is concerned, for this year and also for future years, the first avenue to pursue are the two County Legislators who represent the catchment area for the Riverhead Health Center, which is Legislator Caracciolo and Legislator Guldi. That's natural the way to begin and then work your way westward from there. But the fact of the matter is you brought your concerns to the attention of the committee and will again, probably hear it next week but that's in the future. I would even as the -- Are you the Chair of the Riverhead Advisory Committee? I would also extend an invitation on a regular basis to the Legislators to attend the Advisory Board Meetings, as we do, in other parts of the County -- attend our local Advisory Board Meetings from time to time to make them aware of what your needs are. So they can then advocate early on in the process for the needs of the Health Center. Thank you.

MS. THOMPSON:

Thank you.

DR. O'CONNOR:

Can I just interject the remark about MLK and when we're talking about hours of operation? The 2 percent increase may force them to discontinue two evening hours a week and cut their Saturday sessions to half a day rather than a whole day.

LEGISLATOR POSTAL:

Madam Chair? Yes, I think that that's a really important point. And I have the feeling that the increase that's in the budget is going to, while it seems like an increase and it seems like we're moving ahead is going to have the same impact on all of the Health Centers. One of the, I guess, contributing factors is the new computerization, which ultimately is going to be a good thing. But to date, it requires additional supplies. I mean just cartridges, paper, things like that has required for those Centers which have implemented the computerization. Additional overtime to train staff, which was kind of unexpected, in terms of the cost. And now that that's going to be used to assume all the responsibilities of billing, whereas previously the Centers just had to do comparatively a minimal amount of billing. I think it was data line. I'm not exactly sure that did the billing. Now that they're going to be assuming that responsibility for all the billing, they're going to need additional staff people. So while two and a half percent, I think, it is might seem cheap. That's reasonable. We really have to take into account the additional costs that are

incurred because of the computerization.

DR. O'CONNOR:

But again, I've been told that the computerization has, at least, temporarily created major problems such as you've outlined.

CHAIRPERSON FIELDS:

Thank you. Diane Mercieca. Am I pronouncing that correctly?

MS. MERCIECA:

Yes. Good morning everyone. I represent a small not-for-profit agency on the South Fork. We've been around for 30 years. The South Fork community health initiative has been able to double its role and it expanded services to over five thousand people. Most of these people are not eligible for Medicaid. They fall between the cracks. They are either self-employed or they are working two or three jobs and mostly were in the Town of East Hampton and Southampton.

Last year our Adopted Budget was fifty four thousand, one hundred dollars. We were told that we would be all right this year. Unfortunately, when the budget came out, because somehow or another, we were in the Omnibus Bill. Our budget was completely cut to five thousand dollars. Needless to say, this is devastating to a small not-for-profit. We employ approximately five people and this is one third of our budget. We take pride in hosting health awareness, education and preventative services throughout the community. We have collected over three hundred signatures. If this does go into effect, more than likely, we will have to close our doors this year. I was told by the legislative office through Ann Archer that it was an oversight.

CHAIRPERSON FIELDS:

That would be the County Executive Office?

MS. MERCIECA:

Right.

CHAIRMAN FIELDS:

Not the Legislators?

MS. MERCIECA:

No, I mean the County Executive's Office. I've also been in touch with both Legislators on the East End and are hopefully -- they will resolve the problem with your health and I've also sent letters to all of you, in regards to what's happening.

LEGISLATOR FOLEY:

Madam Chair? Thank you for attending today. You mentioned the County Executive's Office had mentioned to you that what was an oversight?

MS. MERCIECA:

What happened was there was a problem last year that we weren't included in the budget. So what happened was the legislative --

LEGISLATOR FOLEY:

It wasn't included in the proposed budget?

MS. MERCIECA:

Right.

LEGISLATOR FOLEY:

So through the legislative amendment process --

MS. MERCIECA:

For the Omnibus bill.

LEGISLATOR FOLEY:

The Legislature amended the budget to include an appropriation for your contract agency?

MS. MERCIECA:

Right and now they're cutting out all the Omnibus --

LEGISLATOR FOLEY:

Completely. Well, you should be made aware of, through the Chair, is you're not alone in this and if it's an oversight, it's one of the biggest oversights that I've ever witnessed as a Legislator. There's a number of contract agencies, whether in the health care field, mental health field, youth services and the like, adult services that have all been cut. All been cut. Some have been zeroed out. Prenatal coalition has been zeroed out of some particular --

MS. MERCIECA:

I know.

LEGISLATOR FOLEY:

So if this is an oversight and this is why I'm really looking forward to next week's discussion on the budget. And hopefully, Madam Chair, we'll have not only representatives from the Health Department but also from the Executive's Budget Office to explain, not explain away, but explain how this oversight has taken on the proportions of multi-millions of dollars and we look at it in a cumulative way. So if that's an oversight, it's one of the largest ones I've ever seen. I have a case and we're going to speak about this later, of a hospice within my district and a hospice that lost 50 percent of its funding and they use those dollars for child bereavement.

MS. MERCIECA:

Right.

LEGISLATOR FOLEY:

And in a two billion dollar budget, to take out twenty thousand dollars in an area that's used for child bereavement, we only have to look over the last number of weeks to see how important child bereavement services are to children who lose their parents or one of their parents. I mean, this is an oversight that this committee, I and I'm sure others are going to look at very, very carefully. Because to my way of thinking, it's not an oversight. This was premeditated okay! And we're going to have some discussions about this at next week's meeting.

MS. MERCIECA:

I also want to bring out the fact, like I said I'm singing to the choir but we were sent letters that our budget was in place. There will be no cuts and other than when the Adopted Budget came out --

CHAIRPERSON FIELDS:

Excuse me? Do you have a copy of those letters?

MS. MERCIECA:

I can get it for you and fax it over to you, Legislator Fields.

CHAIRPERSON FIELDS:

Okay, can you do it today?

MS. MERCIECA:

Sure can.

CHAIRPERSON FIELDS:

Thank you.

MS. MERCIECA:

As a matter of fact, I might have it with me. I'll get it over to you this afternoon.

CHAIRMAN FIELDS:

Thank you.

MS. MERCIECA:

Thank you very much.

CHAIRMAN FIELDS:

Thank you, we'll see you next week.

MS. MERCIECA:

Is that on the 26th?

CHAIRPERSON FIELDS:

Is it? Hold on, I can look it up.

MS. MERCIECA:

There's so many meetings. You just don't know which ones you're supposed to be at.

CHAIRPERSON FIELDS:

One o'clock, October 25th, which is a Thursday.

MS. MERCIECA:

Okay, thank you very much.

CHAIRPERSON FIELDS:

Patricia Orzano.

MS. ORZANO:

Good morning, Chairwoman Fields and Legislators. Excuse me for my speech. Sometimes I'm very nervous in these situations.

CHAIRPERSON FIELDS:

Don't be.

MS. ORZANO:

I'm a resident of Suffolk County and a small business owner. I'm here on behalf of the 113 7-Elevens and other small business retailers in this County. I'm asking the committee to amend a section of Legislator Tonna's Resolution 1804 in the area of Section 437-3, limitations and exceptions. And in that, I'm asking to consider including just the sale of the promotional packages of buy one, get one, or buy three, get two. This is an immediate purchase. It is a prepackaged promotional product. It has been in existence for over 20 years and it's quite often on a monthly basis. The sale of these -- the sales promotional packages are vital to our business. It is similar to when you go into any of the large retailers or even the chain houseware products, where you buy one, get one.

Unfortunately, in Suffolk County, the retailers, the tobacco retailers have to compete against the Indian Reservation where there are no restrictions and no taxes and also in addition to some of the retailers that sell the cigarettes at State minimum. These promotional packages, as I've said, have been around for as long as I've been in the business and that's over 20 years. They do come and I've brought an example with me. It's not my lunch. They do come labeled like this and they're only sold in this form where -- and this particular one It's a buy two, get one. We've noted that --

CHAIRPERSON FIELDS:

For the record? What is it that you're holding up?

MS. ORZANO:

I'm sorry. It's a three packaged, it's three packages of cigarettes and this particular --

LEGISLATOR HALEY:

A package of three packs.

MS. ORZANO:

Right but it is sent -- it is purchased by the storeowner with the tax paid by the manufacturer for the free pack. Sometimes it's buy one, get one, actually I didn't bring one of those. Sometimes it's buy three, get two. The packets sell -- they come packaged together and that's the way they're sold. It's a -- many, many of this -- people who purchase cigarettes are well aware and they often walk in your store and if they know that this month it's Marlboro and you don't have it, they walk out the door.

But we've noted that in Legislator Tonna's section of the limitations and exceptions, he did include the

manufacturer's coupon, which is quite often in your Sunday paper that allows a person to just come in and receive a free package -- a free cigarette, whether it be Newport or Marlboro free pack without making a purchase, okay! In this case, the purchase is made and the sales tax is paid ahead of time by the manufacturer. So we would like to see this included, so it would clarify this in the future and there wouldn't be any gray area on these promotional sales practices.

LEGISLATOR HALEY:

I want to ask you a couple questions. Is this America?

MS. ORZANO:

Yes, it is.

LEGISLATOR HALEY:

Do we live in a free marketplace?

MS. ORZANO:

Yes.

LEGISLATOR HALEY:

Is the sale of tobacco legal in the United States?

MS. ORZANO:

Yes, it is.

LEGISLATOR HALEY:

Is the smoking of tobacco by consenting adults legal in the United States?

MS. ORZANO:

Sure is.

LEGISLATOR HALEY:

Then I can't imagine why something like this, which to me is purely a constraint of trade. It certainly smacks in the face of freedom, consenting adults and my question is what's going to be next? I wouldn't be a bit surprised if we continue in the path we've been going in this Legislature that next year or next month, somebody is going to tell you, no one is allowed to smoke in Suffolk County. I wouldn't be a bit surprised. I've never seen anything so far reaching, since I've been a Legislator and I think your points are well taken. It's simply, people are allowed to smoke if they are adults. They are allowed to accept cigarettes, whether they pay for them or they're given to them for nothing. I think -- I would imagine that this particular legislation borders on being unconstitutional. And I can't imagine for the life of me why someone would attempt to do that. What's it going to be next? You can't -- nobody could buy.

The next thing is going to be -- and you're in a bar having a drink, the bartender is not going to be allowed to buy back one. That's going to be next. Or next they're going to take it a step further and they're going to say, you know what? We're concerned about your health. We want you -- we want to make sure you use fat free salad dressing on your salad at home. Because you know why? Because we know what's better for you. Thank you.

CHAIRPERSON FIELDS:

Did you want to add anything more?

MS. ORZANO:

No, thank you very much for your time.

CHAIRMAN FIELDS:

Okay. All right, thanks for coming.

MS. ORZANO:

Would anyone like me to leave a --

CHAIRMAN FIELDS:

No, no thank you.

LEGISLATOR HALEY:

If you had cigars, we could talk.

MS. ORZANO:

Only if you have double I.D.

CHAIRMAN FIELDS:

Thanks for coming. Jay Zuckerman, Southside Hospital.

MR. ZUCKERMAN:

Good morning. It's a pleasure to be back here. It's like Old Home Week. And I want to thank the Legislature for their ongoing support of Southside Hospital and the Health Centers that we manage, as well as the other Health Centers. I wanted to address two topics of interest to you. One is the status of the Bay Shore Family Health Center and secondly, the 2002 Budget. Let me first talk about the Bay Shore Family Health Center. Unfortunately, possibly two weeks ago, the Health Center had to be evacuated for the third time, because of what I will call sick building syndrome. Approximately, thirteen Southside Hospital Employees were sent by ambulance to the Emergency Department of Southside, as well as Good Samaritan Hospital with a range of symptomatology that are related to allergic reactions and respiratory conditions. In light of this and in light of the efforts, the large efforts that we've made with the County to try to identify what the problem is, as well as the extensive remediation that occurred during this past summer. It's my sense that it is highly unlikely that the staff will return to that location.

Right now, there are efforts underway to integrate the Bay Shore patients and the staff at Bay Shore within the Brentwood Family Health Center. That is going to be a difficult task. What we are endeavoring to do is to increase the hours of visits that are available by approximately 25 percent at the Brentwood Family Health Center, as well as at the Central Islip Family Health Center. We are now in the midst of conducting training for the Bay Shore Family Health Center staff and the terms of the IBX System. They were slated to be trained some time in the first quarter of next year. But obviously, since they are residing at the Brentwood Health Center, we need to train those staff.

The problem we face is access. While we are increasing hours, I think, the access for the Bay Shore Community will, in fact, be problematic. During the period in which the Health Center was co-located with the Brentwood Health Center, what was at one time a no show rate, patients not arriving, as scheduled, of 18 percent increased to upwards of 45 percent. Many patients walk to the Bay Shore Family Health Center. And there is a major concern with regard to the pre-natal patients who seem to find it most difficult to, in fact, get the transportation that is needed to, in fact, venture to the Brentwood Health Center if, in fact, they are from the Bay Shore Community.

I think we all realize that primary care is local care. Each of us should look at whom do we go see when we see our family doctor. By and large, we travel anywhere between two to three miles. It's not like tertiary care, such as getting a heart transplant or open-heart surgery, where we will go to the Tertiary Regional Centers that might be twenty miles away. So we need to look at that.

Similarly, I've discussed with you previously, the kinds of conditions that the Health Centers address, which are primarily ambulatory care sensitive conditions. And probably by now, you can tell me what an ambulatory care sensitive condition is, but there's one such as asthma, diabetes, bronchitis, pneumonia, heart failure, hypertension, angina, chest pain and what have you. All conditions that with proper primary care can be provided for in a primary care setting and not more expensively in an emergency department or resulting in an in-patient admission.

The challenge for you and the challenge for us is to, in an expedited fashion, to find a new location for the Bay Shore Family Health Center. Obviously, it's not something that any of us had planned for or thought about and obviously, there are some major budgetary considerations. And it's my hope and it's my prayer that we can work collaboratively to find the money necessary to, in fact, relocate the Health Center, so that we can provide local primary care to the patients who need that primary care.

With regard to the 2002 Budget, while we appreciate the 2 percent proposed increase, there are some major concerns. And those concerns relate to the reality that, in the next year, we will face potential salary increases for our staff of 3 to 4 percent. The Legislature, quite recently, took the bold step of insuring that health care workers on the lowest end of the spectrum receive a living wage. That holds true for the Health Centers and it holds true in a market place, when nurses, there are fewer of them, we have a large number of nurses who are leaving the field and we need to be more competitive with regard to salaries and compensation for nurses and the other staff who work in the Health Centers.

Fortunately, in the health care field, there is an increase in demand of providers but the reality is we need to be financially competitive. So if we look at a potential 3 to 4 percent increase on salaries and salaries are about 70 percent of the Health Center's Budget, what you're really looking at is not a maintained budget but a budget where, in fact, we will have to reduce services. At the same time, there is an extensive effort on the part of the Health Department to work with the hospitals to expand the hours of service. And we are endeavoring to look at models like that. But unfortunately, what we're doing is we're moving the deck chairs from the Lusitania onto the deck chairs of the Titanic. The same number of providers spread over more hours. It is a wonderful idea to increase access but unfortunately, in light of the budget constraints, we may have some serious problems in that vein.

What we've seen in areas such as prenatal care at Southside through the Health Centers, we see an increase of approximately 120 deliveries per year. The American College of OBGYN, a professional organization for the obstetrical community, indicates that for that number of deliveries you may, in fact, need an additional obstetrician. So we are looking at that as an added service. We all know the benefit of prenatal care and the financial and other consequences if a Mom to be does not get adequate prenatal care. So we need to look at those kind of things.

We need to look at the high cost of doing business. Pharmaceuticals, they are skyrocketing in price for all sorts of reasons. We need to look at the impact of regulation. There are some regulations that are on the horizon that relate to the health insured and in supportability and act -- that, in fact, address the issues of confidentiality. Some gurus in the field indicate that this may be more expensive to the health care field than Y2K and there is an implication for the Health Centers as well.

The dilemma I face is, we've been asked by the Health Department to submit a budget. We've been asked to submit a budget that is no more than 2 percent of next year. As good citizens, we will do that. The dilemma is the document and you will see from Southside and from the other Health Centers will, in fact, be in accordance with what we're asked to do. But make no allusions that those budgets will be acceptable, in terms, of providing the kind of care that our communities need, the kind of commitment that the Legislature has made to the communities and to the citizens of this County. But once again, I want to thank the Legislature for its current past and its future support and feel free to ask any questions. And we're at your disposal to provide you with any information about these two important issues. Thank you.

CHAIRPERSON FIELDS:

I just want to ask a quick question. Because of September 11th, have you seen any increase in patient care, because of people being maybe falsely afraid of something that was happening or --?

MR. ZUCKERMAN:

I think there are two issues to focus about. Fortunately, relative to the issue of Anthrax, there were some phone calls approximately a week ago from concerned citizens. Those have, in fact, died down significantly and we're working closely with the Health Department relative to their providing daily information about any clusters of disease that may be unusual. With regard to the emotional effects of September 11th, we have, in fact, started to see those kinds of things arise in the Emergency Department amongst patients, particularly amongst patients who utilize our psychiatric services. The dilemma we face is, if you look at any of what the experts say, there is that lag time between the effect of September 11th and when the full impact of the realization of what happens. And I know both the Division of Mental Health Services, in the County Health Department is working very closely with the providers of Mental Health Services to provide adequate resources to that. FEMA, I gather is providing resources, as is the Federal Government. So I think we have some effective plans in place to address the needs of our citizens who are affected both physical and emotionally due to the trauma of September 11th.

CHAIRPERSON FIELDS:

I think part of -- I think we all felt emotionally affected by the World Trade Center. But I think that people are probably not focusing on the fact that it did come out here in different ways. And I think it's going to continue to come out in different ways and we do have to be prepared for that. But just on something you said. I think I had a conversation immediately after September 11th, with Doctor Bradley about anthrax and bio-terrorism and how we might be prepared. And I believe she told me that they have been doing counts for quite some time on the Emergency Room on what comes into the Emergency Room and what is an epidemic and what kinds of symptoms they have. About how long have they been looking at that kind of activity?

MR. ZUCKERMAN:

To the best of my knowledge, that's an activity that's appeared for more than a year. We -- the original focus of these kinds of things really evolves around the flu season. That here again, that puts an additional burden on

hospitals. We do results in closures of Emergency Departments. So we -- working with the County work very proactively to identify those clusters and identify what things can, in fact, be done. So that's an ongoing basis where, in fact, there are both regulations that require us to report certain things to the Health Department that are infectious diseases and which we do on an ongoing basis. And over the past, more than a year, we make special efforts on a daily basis to communicate where we are relative to the kinds of things that we see epidemiologically in the communities that we serve.

CHAIRPERSON FIELDS:

I have a feeling --

MR. ZUCKERMAN:

The Health Department has done a very pro-active job of that.

CHAIRPERSON FIELDS:

I have a feeling that the hospitals will be where people will head if there is a problem. They'll probably go there first rather than their own doctor but maybe I'm wrong. I don't know. So I think we do need to be prepared for that additional burden beyond what we already need.

MR. ZUCKERMAN:

Here again, the Health Department is working with the State Health Department. The Nassau, Suffolk Hospital Counsel is working pro-actively, particularly with regard to the issue of education and to address the myth versus the reality of infectious diseases and the kinds of appropriate treatments, both to calm the public and to make the providers more sensitive to things that may have been just an academic exercise that today is a reality.

CHAIRPERSON FIELDS:

Thank you. Don't leave yet. Legislator Foley has a question.

LEGISLATOR FOLEY:

Thank you Mr. Zuckerman for attending and giving us the benefit of your professional expertise. It's always informative to hear you speak. On the point of the closure of the Bay Shore Health Center, perhaps you're aware that in August, the Space Management Committee had directed the Health Department, as well as the County Attorney's Office and Real Estate Division to begin the process of looking for a new Health Center for Bay Shore. In lieu of the event, at that time, the eventual relocation from the Touro Building. Now, obviously that's been -- now has to be accelerated. Has the department or anyone related there to -- contacted you about the search for a new Health Center?

MR. ZUCKERMAN:

We have had discussions with the Health Department. We have, in fact, provided them with information about our thoughts --

LEGISLATOR FOLEY:

Okay.

MR. ZUCKERMAN:

Of the Planning Department and the New Shore LIJ Health Systems is looking at the demographics to see what is the best location. I think the big concern on the part of the Health Department, as well as Southside is where the rubber meets the road.

LEGISLATOR FOLEY:

Sure.

MR. ZUCKERMAN:

Where will the money be and there needs to be a commitment for those finances to deal with the least expensive, in particular and --

LEGISLATOR FOLEY:

And just to the Chair, initially, the resolution that was before the Space Committee had directed the department to look in Bay Shore and then the Executive Branch changed the geographic area to say within the Town of Islip. And under questioning that I had as a member of the Space Management Committee, that I had asked the Health Department, I said notwithstanding the fact that you've enlarged the geographic area that will be reviewed for a

possible, for a probable Health Center. Are we still going to look in the -- let's say at least the greater, at most, the greater Bay Shore area, since as you said before, primary health care is local health care. And the answer that I received is yes, they intend to look at Bay Shore or, at most, the greater Bay Shore area in order to keep it close to where it currently is, because of the great need of those who utilize the current services. So is that your understanding that that's where they are looking? Are there other areas of Islip that you've been told that they're looking, that they intend to look or --?

MR. ZUCKERMAN:

There is a concern, in that approximately four or five years ago, the County received funding through primary care initiative to provide additional primary care services in the Central Islip Community.

LEGISLATOR FOLEY:

Right.

MR. ZUCKERMAN:

As a result of that grant, they -- a satellite of the Bay Shore Health Center and that's sort of legalistic way to open up additional capacity was located on Suffolk Avenue. That facility is growing exponentially. The lease on that building has one more year with some renewals. Ideally, it's not the best location, so there needs to be consideration about that. So there are some thoughts about -- we have an opportunity at Central Islip in Bay Shore, should we, in fact, consider a single additional site? My concern is if you look at the geography, I think you -- if you try to find a common place for both facilities in one location, you will disenfranchise both communities. And I think they need to be looked at separately and apart, in that the Central Islip Community potentially looking at the Ronkonkoma Community may be another area where there is a primary care need. But I think the Bay Shore issue needs to be looked at separately and apart from other considerations in light of the local needs of that community.

LEGISLATOR FOLEY:

Now a disenfranchisement that you're talking about is one based upon limited transportation availability?

MR. ZUCKERMAN:

Access transportation.

LEGISLATOR FOLEY:

Access.

MR. ZUCKERMAN:

Here again, if I live in Bay Shore and my child has a fever and I've got to take two buses to get to a site that might be five, six miles away versus coming to Southside, I'm going to go to Southside and that's not good health care. It doesn't mean that we don't provide good health care but here again, what we're concerned in the life --

LEGISLATOR FOLEY:

Concerned --

MR. ZUCKERMAN:

And the Health Department has been to provide a continual care to the patients of the community.

LEGISLATOR FOLEY:

Thank you.

CHAIRPERSON FIELDS:

I think we saw an indication of that when the Bay Shore Health Center just closed a while ago, where patients were not or completely unable to get from Bay Shore to Brentwood, which is not even -- excuse me, that far away. So I think we do really have to contain it in the area where it was.

MR. ZUCKERMAN:

And for better or for worse. We are seeing an explosion in the numbers of patients we treat in our Emergency Department. For this year alone, we're going to probably see an increase of a magnitude of two thousand visits related to a number of factors. It may be related to the fact that Medicare Managed Care has removed itself primarily from Suffolk County. So you may have more seniors who are using Emergency Departments and there are some other kinds of phenomena that are occurring that even if someone would have asked me two or three years ago whether this would happen, I didn't think so. But in fact, we have the reality of larger numbers of patients who

are coming to our Emergency Department and other Emergency Departments.

LEGISLATOR FOLEY:

Just as a follow-up through the Chair and the Commissioner later can also answer this question. Is there a concern with the permanent closure of the Bay Shore Facility that another entity may attempt to come into the area? And in essence, take clients away from the Health Center?

MR. ZUCKERMAN:

That's something that we --

LEGISLATOR FOLEY:

Is that a possibility or is it just -- or is it such a lengthy process to receive the approvals from the State Health Department? That it's highly unlikely that there would be a competing entity coming into that area in the same framework as finding a new location for the Bay Shore Health Center?

MR. ZUCKERMAN:

I think the implication really relates to a mandated Medicaid Managed Care. The Health Department has done a wonderful job with the Suffolk Health Plan and aligning that with the Health Centers. Here again, part of the choice of Medicaid Managed Care, individuals who would go into the plan is to choose between plans and they may, in fact, choose based upon access. So if there is a major piece of the Health Center Program that is missing, you may, in fact, lose some opportunities. And while I don't necessarily see somebody coming in and building a Health Center, but I see the potential of individuals electing some other plan other than the Suffolk Health Plan because of the access issues. And while I can't judge other Managed Care Providers in the Medicaid business, I know 110 percent that the Health Department and the County Legislature has done it for the right reasons, as opposed to some economic considerations such as I do -- I am involved in Medicaid Managed Care to avoid the tax that I would have to pay as an insurance provider if I don't provide a managed care product for the Medicaid population. So that's my concern, in terms, of the choice that individuals will have to be making about entering one Medicaid Managed Care Product or another.

LEGISLATOR FOLEY:

Thank you.

MR. ZUCKERMAN:

You're welcome.

CHAIRPERSON FIELDS:

Thank you for coming.

MR. ZUCKERMAN:

My pleasure, any time. Thank you.

CHAIRPERSON FIELDS:

Okay, I guess, unless we have any further questions, we'll move on to the agenda. I.R. 1490 a Local Law to establish healthy bottled water labeling law.

MR. SABATINO:

It has to be tabled Madam Chair, because I've been requested to do one more corrected copy.

LEGISLATOR FOLEY:

Second.

CHAIRPERSON FIELDS:

Motion to table, seconded. All in favor? Opposed? Tabled.

TABLED RESOLUTIONS:

**I.R. NO. 1490 Adopting Local Law -2001, a Local Law to establish healthy bottled water labeling law.
(Legislator Cameron Alden)**

***** CONSUMER PROTECTION PRIME COMMITTEE*****

VOTE: 4-0-0-0 TABLED

CHAIRPERSON FIELDS:

I.R. 1665 directing the County Department of Public Works to implement an enhanced pesticide spraying notification via reverse E-911 Program.

LEGISLATOR FOLEY:

Can we have the Commissioner step forward, Madam Chair? Through the Chair, Madam? Thank you. From our last committee meeting, where do things stand with interdepartmental cooperation with this resolution?

DR. BRADLEY:

My understanding from Mr. Ninivaggi is that through his Commissioner, he was going to arrange a meeting, which as far as I know if it happened, it didn't include the Health Department. I'm sorry. I don't have any other information on that.

CHAIRPERSON FIELDS:

I'm going to make a motion to table. All in favor? Opposed? Tabled.

I.R. NO. 1665 (P) Directing the County Department of Public Works to implement enhanced pesticide spraying notification via reverse E-911 Program. (Legislator Allan Binder)

VOTE: 4-0-0-0 TABLED

CHAIRPERSON FIELDS:

1751 accepting and appropriating 100 percent Federal Grant Funds.

LEGISLATOR FOLEY:

Motion.

LEGISLATOR POSTAL:

Can we --

LEGISLATOR HALEY:

Consent calendar?

LEGISLATOR POSTAL:

Can I ask a question? I think this was tabled previously.

CHAIRPERSON FIELDS:

Because of the budget from the State?

LEGISLATOR POSTAL:

Yes, the Federal Funding that came through the State. Are we still in that same situation? Or can we now act on this?

DR. BRADLEY:

My understanding is that for 1751 and 1752, we have gotten clarification, approval, authorization from the State that they will back these up.

LEGISLATOR FOLEY:

Motion to approve.

CHAIRPERSON FIELDS:

Motion to approve and place on the consent calendar I.R. 1751 and I.R. 1752. All in favor? Opposed? Approved?

I.R. NO. 1751 (P) Accepting and appropriating 100% Federal Grant Funds from the New York State Department of Health Services to the Department of Health Services, Division of Patient Care Services for the WIC Nutrition Program and creating and abolishing a position in the Department of Health Services for this program. (County Executive)

VOTE: 4-0-0-0 APPROVED PLACED ON CONSENT CALENDAR

I.R. NO. 1752 (P) Accepting and appropriating 100% Federal Grant Funds from the New York State Department of Health Services to the Department of Health Services, Division of Patient Care Services for Immunization Action Plan, creating and abolishing a position in the Department of Health Services for this program. (County Executive)

VOTE: 4-0-0-0 APPROVED PLACED ON CONSENT CALENDAR

CHAIRPERSON FIELDS:

I.R. 1804.

LEGISLATOR HALEY:

Motion to table.

LEGISLATOR FOLEY:

Do we --

LEGISLATOR POSTAL:

What the sponsor wanted to do I was going to --

LEGISLATOR FOLEY:

Do we know what the sponsor wishes to do with the resolution? Is there anyone from his office that can answer that question? Does he want to move it today? We need to say it on the record here. So the indication is the sponsor of the bill would like to see this reported out of committee?

LEGISLATOR HALEY:

Is that what we do with everyone who sponsors a bill in this committee? We verify whether or not they want to move it?

LEGISLATOR FOLEY:

Well, it depends on the resolution. It depends on the circumstances.

LEGISLATOR POSTAL:

Madam Chair?

LEGISLATOR FOLEY:

For instance, yesterday just to answer Legislator Haley's question. For instance, yesterday we had a sense resolution in my committee, Public Works that we received a call from the sponsor of the bill, Legislator Binder that wanted the sense resolution tabled. So we tabled the resolution. In this case, the indication is here that the sponsor of the bill and those of us who do support the bill that the indication is that the sponsor of the bill wishes to have it reported out of committee.

LEGISLATOR POSTAL:

Madam Chair?

LEGISLATOR HALEY:

My point is we just don't need to verify every time we're looking at a piece of legislation.

LEGISLATOR FOLEY:

It's not every time.

LEGISLATOR HALEY:

It's a little bit different than a sponsor calling and saying please table it.

LEGISLATOR FOLEY:

It's not every time but certainly, if the sponsor wanted this tabled that we would have tabled it. But the indications are that he wishes to have it reported out and for those of us who --

LEGISLATOR HALEY:

You know what? I'm sorry I asked.

LEGISLATOR FOLEY:

For those of us who support the bill are now ready to, as I will, now make a motion to approve.

CHAIRPERSON FIELDS:

Yes?

LEGISLATOR POSTAL:

I would second that motion but I wanted, Madam Chair, if I could?

CHAIRPERSON FIELDS:

Yes, you were next.

LEGISLATOR POSTAL:

All right, thank you. I wanted to ask Legislator Haley, the reason that he made the motion to table it. Because it was my intention to approve it but you know, I certainly would want to listen to why he made that motion.

LEGISLATOR HALEY:

I'm sorry, you weren't here before.

LEGISLATOR POSTAL:

Oh, I'm sorry.

LEGISLATOR HALEY:

Oh, you missed my whole line of questioning that someone who had a problem with this who spoke earlier. I started with the question is this America? And I just -- this is such an overreach of government, I've never seen anything like it in the Suffolk County Legislature. You're talking about smoking is, in fact, legal. It's especially legal for adults. It's legal for people to market. It should be legal for someone to hand somebody something for free. And this is a tremendous reach by government to say to the people -- to say it to all of a sudden tobacco companies, who still have a right to sell, that you no longer can give away free packets to consenting adults. This is the epitome of social engineering. This is the epitome of the problem of liberalism in the United States. And I'm really shocked and appalled that this Legislature would even consider something like this, which is probably unconstitutional.

LEGISLATOR POSTAL:

Thank you for the explanation. I disagree with you.

CHAIRPERSON FIELDS:

Commissioner Bradley, how do you feel about a --?

LEGISLATOR FOLEY:

I never realized that you define whether tobacco smoke was liberal. This really is a new one for those who engage in political philosophy that we can see whether that smoke, is that conservative smoke or liberal smoke. This is really eye opening for me.

CHAIRPERSON FIELDS:

I actually thought we were going to get through this whole agenda without a -- okay.

DR. BRADLEY:

I am opposed to the distribution of free tobacco products. Many people, most people, who smoke want to stop smoking, over 80 percent. And giving them free tobacco products is not going to help them make the decision that's in their best health interests. Now --

LEGISLATOR HALEY:

I have to respond to that.

DR. BRADLEY:

Okay.

LEGISLATOR HALEY:

Yes and you know what? I appreciate that you know what's better for me, okay! And that's wherein lies the problem when -- with the Federal Government, State Governments, all of a sudden deciding what they think is better for adults who can make sound decisions about what they want to do with their life. Whether it's having a drink, smoking a cigarette, or not jogging or jogging too much. All of those things are profound decisions that we have to make as an adult. We have to be responsible for ourselves, our actions and everything like that. What everybody is saying here is that adults don't have that capability and now we're going to take it a step further. There's nothing that -- we're talking about principles, an idea or a principle here, not just the issue of smoking.

I think you could take that same argument, whether it's for smoking and you can extend it to anything, to the extreme where you shouldn't be -- you have to eat -- put fat free salad dressing on your salad or you can't have more. You know what? Even if you're in your home, you can't have more than two drinks. How far is it going to go? And my problem is, is it incremental? This is what the incrementalism that happens in Suffolk County Government and it's happening in many parts of the United States is you give that little bit because you think it's the right thing to do. You think it's the politically correct thing to do but what, in fact, is you're taking another step toward social engineering, which I have a significant problem with.

DR. BRADLEY:

This is not the political right thing to do. It's the public health right thing to do.

LEGISLATOR HALEY:

Again I --

DR. BRADLEY:

We're not telling people they can't smoke.

LEGISLATOR HALEY:

I smoke --

DR. BRADLEY:

This is not telling --

LEGISLATOR HALEY:

You know what?

DR. BRADLEY:

This is just telling the Tobacco Company that they can't distribute free tobacco products to people who are addicted to tobacco --

LEGISLATOR HALEY:

Don't --

DR. BRADLEY:

And most of them will probably die from the effects of tobacco.

LEGISLATOR HALEY:

Don't you dare tell me how to deal with my health. That's the problem. I should be educated to make sound decisions as an individual, okay! But don't you dare tell me what I should or shouldn't do for the benefit of my health.

DR. BRADLEY:

I'm not telling you --

LEGISLATOR HALEY:

Well, you are when you're saying --

DR. BRADLEY:

I'm just telling the tobacco industry --

LEGISLATOR HALEY:

That all of a sudden, I can't accept --

DR. BRADLEY:

Should not be giving free tobacco products.

LEGISLATOR HALEY:

This is America. This is the free marketplace, okay! What's it going to be next?
What are you going to say that they can't use next?

DR. BRADLEY:

Tobacco kills more people than any other substance.

LEGISLATOR HALEY:

I appreciate that. But my right to smoke is --

DR. BRADLEY:

And I'm not stopping you from smoking.

LEGISLATOR HALEY:

Counted in the constitution.

DR. BRADLEY:

I'm not telling you, you can't smoke.

LEGISLATOR HALEY:

Thank you, Madam Chair.

DR. BRADLEY:

I just want to make one comment. I think, there may be an issue of preemption with this. That's the only concern that I have. I think that it's the absolute right thing to do. The tobacco industry should not come in and distribute free tobacco products. There may be an issue with the State Public Health Law, in terms of preemption. That's the only comment that I have.

LEGISLATOR FOLEY:

Madam Chair?

CHAIRPERSON FIELDS:

You asked what was next, Marty?

LEGISLATOR FOLEY:

Madam Chair?

CHAIRPERSON FIELDS:

The fact is that we're taking cigars away from everyone.

LEGISLATOR HALEY:

Ow!

LEGISLATOR FOLEY:

Madam Chair? Just before we have Counsel speak about the preemption issue, just to ask the Commissioner the following question. This free marketing of this product that when used as designed that kills, as we all know, is this also a part of their campaign to keep people addicted to cigarettes? And isn't it also a means by which they intend to continue to market for people who smoke cigarettes? Is that not correct?

DR. BRADLEY:

I mean, this is a form of marketing. If you ask them, they say they're doing this for brand switching. That they want someone who smokes a particular brand to try another brand. But we know probably the only thing that has

people switch is the cost of the cigarettes. People are very loyal to the brand that they're smoking and usually they don't change. And in general, people smoke especially the kids what's advertised. So I just think that this is a part of marketing.

LEGISLATOR FOLEY:

Just as a follow-up to that Madam Chair. Commissioner, you have come before us and described in detail the Comprehensive Tobacco Control Program that the Health Department is undertaking in cooperation with the component school districts in the County and with others. Putting aside the preemption issue. This resolution complements that effort?

DR. BRADLEY:

Yes and for the main reason that I said is, we did a survey, an adult survey, which I'll be happy to provide and 70 to 80 percent of the smokers that we spoke to said that they wanted to quit. It was the addiction that makes it very difficult. So if you have someone who is addicted, wants to quit and they go into a public place and they're given free cigarettes, that makes it more difficult for them to break that addiction.

LEGISLATOR FOLEY:

May I?

LEGISLATOR HALEY:

Okay and I could find probably 100 percent of overweight people that would tell you they don't want to be overweight. They wish they could do something about it because of type two diabetes or whatever it might be. So what are you going to do about that? Okay!

DR. BRADLEY:

Marty, I'm not telling you, you can't smoke.

LEGISLATOR FOLEY:

They are not getting free steaks at the supermarket, two for one or three for one. They've got to pay for every T-bone that they have.

LEGISLATOR HALEY:

You're buying up stuff at Waldbaums and they give you a free turkey. I mean it happens.

LEGISLATOR FOLEY:

There's no secondary effect to eating turkey as there is to smoking.

CHAIRPERSON FIELDS:

We have a motion to approve and we have a motion to table. The motion to table takes precedence. Is there a second?

LEGISLATOR HALEY:

There's no second.

CHAIRPERSON FIELDS:

Is there a second? That's what I was asking. No second. Motion to approve by Legislator Foley, seconded by Legislator Postal. All in favor? Opposed? And Legislator Haley is opposed.

I.R. NO. 1804 (P) Adopting Local Law No. -2001, a Local Law to extend ban on distribution of free promotional samples of tobacco products. (Legislator Paul Tonna)

VOTE: 3-1-0-0 APPROVED

CHAIRPERSON FIELDS:

I.R. 1901. I would make a motion to defer to prime, which is Budget. All in favor? Opposed? Deferred to Prime.

INTRODUCTORY RESOLUTIONS:

I.R. NO. 1901 Amending the Adopted 2001 Operating Budget and appropriating funds to create Public Access Defibrillators Coordinator (PAD) position at County Department of Health Services. (Legislator

Andrew Crecca)

VOTE: 4-0-0-0 DEFER TO PRIME

CHAIRPERSON FIELDS:

I.R. 1903 and I.R. 1904. I would make the same motion, same second.

I.R. NO. 1903 Amending the 2001 Operating Budget transferring funds to the Community House of Long Island. (Legislator Maxine Postal)

*****BUDGET PRIME COMMITTEE*****

VOTE: 4-0-0-0 DEFER TO PRIME

I.R. NO. 1904 Amending the 2001 Operating Budget transferring funds for Row for a Cure. (Legislator Michael Caracciolo)

*****BUDGET PRIME COMMITTEE*****

VOTE: 4-0-0-0 DEFER TO PRIME

CHAIRPERSON FIELDS:

I.R. 1937 and 1941. I would make the same motion to defer to prime. The I.R. 1937 is in relation to the sale by Suffolk County of its rights to receive payments expected to become due under the master settlement agreement and the related consent decree and final judgement with various Tobacco Companies.

LEGISLATOR FOLEY:

Do we -- what happened in the Budget -- Finance Committee on that particular resolution?

LEGISLATOR POSTAL:

Madam Chair?

CHAIRPERSON FIELDS:

Yes?

LEGISLATOR POSTAL:

Finance has been rescheduled to Tuesday at 12:30.

LEGISLATOR FOLEY:

All right, do we have --

LEGISLATOR POSTAL:

We're expecting a report from the Budget Review Office, so I haven't received that report yet. I don't know what's going to happen Tuesday.

LEGISLATOR FOLEY:

Madam Chair? If I may to the Commissioner? You reviewed this resolution 1937?

DR. BRADLEY:

Yes.

LEGISLATOR FOLEY:

And your thoughts about it please?

DR. BRADLEY:

Well, my main concern is that there would be money put aside for tobacco control. And the way the resolution is written, it guarantees that 20 percent of the tobacco settlement fund for the coming into the County be put aside for Tobacco Control Program and not securitized. So that would be my main concern and it seems to address that.

LEGISLATOR FOLEY:

It seems to address it?

DR. BRADLEY:

Yes, it addresses that.

LEGISLATOR FOLEY:

All right. I don't know whether we want to defer. I mean, I think, we need to first hear from let's say be part of the discussions on Tuesday at the Finance Committee Meeting to hear what has to be said.

CHAIRPERSON FIELDS:

Well, we can't really table it.

MR. SABATINO:

Well, maybe just to clarify that. The public hearing hasn't taken place yet, okay! What's happened is the hearing is scheduled for October 23rd. The Budget Review Report was issued about a week ago. It's like a nine-page report, which deals with the financial aspects. It's really not so much a health issue as it is a budgetary and fiscal issue. And the Finance Committee Meeting was scheduled to -- was rescheduled to Tuesday, to allow the Investment Banker and the Bond Counsel to make that full presentation. And I believe that the notice invited all Legislators to attend that meeting, so there would be one presentation by the experts as opposed to two.

LEGISLATOR FOLEY:

So we have to table this anyway.

MR. SABATINO:

That was the background of how it got from there to here. But right now, the public hearing has not been closed.

LEGISLATOR FOLEY:

All right, so we'll have to table it.

CHAIRPERSON FIELDS:

But then I would suggest maybe that the Health Committee be at that financial meeting.

LEGISLATOR FOLEY:

It's going to be on Tuesday at the General Meeting, so we'll be in the building.

CHAIRPERSON FIELDS:

Okay.

LEGISLATOR FOLEY:

So motion to table pursuant to the need to hold the public hearing.

CHAIRPERSON FIELDS:

Okay.

LEGISLATOR FOLEY:

It's a Local Law.

CHAIRPERSON FIELDS:

I'll second that motion. All in favor? Opposed? Tabled.

I.R. NO. 1937 Adopting Local Law No. -2001, a Local Law in relation to the sale by Suffolk County of its rights to receive payments expected to become due under the master settlement agreement and the related consent decree and final judgement with various Tobacco companies. (County Executive)

***** FINANCE & FINANCIAL SERVICES PRIME COMMITTEE *****

VOTE: 4-0-0-0 TABLED

CHAIRPERSON FIELDS:

I.R. 1941. I will second that motion. All in favor? Opposed? Deferred to prime.

LEGISLATOR FOLEY:

Yes, on the motion? Before the vote is called? By deferring it to Prime, Budget has -- it's my understanding that Budget has tabled this resolution. Is that not correct?

MR. SABATINO:

Yes, the Budget Committee tabled everything but a request has been made to reschedule -- to schedule a new meeting of the Budget Committee for Tuesday because of several important bills.

LEGISLATOR FOLEY:

Madam Chair, I would kindly ask that we make a motion to approve this resolution even though we're secondary. Because the issue here for this committee are the health risks and health assessment risks that need to be reviewed at Plum Island. The Budget Committee will be looking at the monetary issue. We, as a Health Committee, I think need to make a strong statement that given the facts of what happened last month and the ongoing issues that as a Health Committee, I would prefer not to defer this Prime. But instead, make our own independent judgment to approve it and that way the Budget Committee will see that at least from this particular committee, the secondary committee that we, from a standpoint of public health and risk assessment that we see a real need for this particular resolution to be approved by the Prime Committee. So I make a motion to approve.

CHAIRPERSON FIELDS:

I would think that under normal circumstances, this would have passed in that committee. But that was not a normal meeting.

LEGISLATOR FOLEY:

I would rather not defer. I think we should --

CHAIRPERSON FIELDS:

Okay, make a motion to approve; I'll second that motion. All in favor? Opposed? Approved.

LEGISLATOR FOLEY:

All right, so it's approved. All right, thank you.

I.R. NO. 1941 Amending the 2001 Operating Budget transferring funds to the Capital Program and Budget for the Environmental and Public Health Review and Risk Assessment of Plum Island. (Legislator Michael Caracciolo)

***** BUDGET PRIME COMMITTEE *****

VOTE: 4-0-0-0 APPROVED

CHAIRPERSON FIELDS:

Introductory Sense Resolutions, Sense 84 memorializing resolution requesting State of New York to establish regional traumatic brain injury technical assistance centers. I'll second the motion. All in favor? Opposed? Approved.

INTRODUCTORY SENSE RESOLUTIONS:

- Sense 84-2001 Memorializing Resolution requesting State of New York to establish Regional Traumatic Brain Injury Technical Assistance Centers. (Legislator Jon Cooper)

VOTE: 4-0-0-0 APPROVED

CHAIRPERSON FIELDS:

Motion to adjourn.

LEGISLATOR FOLEY:

We shouldn't adjourn yet. There are some questions we have for the Health Commissioner.

CHAIRPERSON FIELDS:

Oh no, I don't want to adjourn.

LEGISLATOR FOLEY:

Particularly about the Bay Shore, the closure there. And also about if she can give us an update on some anthrax scares that I understand happened out in the Riverhead Building. But I'll await the Chair's direction on this.

CHAIRPERSON FIELDS:

Yes, I'm sorry, I completely lost it there for a minute. The Bay Shore Health Center.

LEGISLATOR FOLEY:

Let the record reflect that you didn't lose it, it's just that your thoughts were on other things at the time and now you will get back on this issue.

CHAIRPERSON FIELDS:

No, Marty. Marty, no you're not going to --

LEGISLATOR HALEY:

Let the record also reflect I have a six o'clock appointment.

CHAIRPERSON FIELDS:

The Bay Shore Health Center has been closed. There may be some questions that we might get involved in here, at which time, I will ask for Executive Session. So just knowing that, we'd like to have you respond.

DR. BRADLEY:

Okay. Jay Zuckerman gave a lot of information. I'll summarize some of what he said and I'd be happy to answer questions. As was said, the Bay Shore Health Center was closed for the second time and whereas the first time -- our intentions were that it would be for a short period of time until we did some things. At this point, it doesn't look like it will reopen anytime soon. We are doing an investigation but we are all very perplexed as to what is the cause of the illnesses in the building. So it looks like a more long term closure and considering we have another few years on our lease, I think it's very prudent to go forward looking for another facility.

In the interim, we are using the staff from the Bay Shore Health Center to expand hours at Brentwood and Central Islip, so that patients can be referred there. When we closed the first time, we had prenatal on site at the hospital and it actually worked very well. The space that was used originally at Southside is no longer available. Southside is doing demolition work in that spot. So we -- have at Southside to look for another space. And I think they have actually found something in the community, in the area near Southside. Because prenatal -- with the concern about non-compliance when we closed it the first time and I'm very concerned that the prenatal people get to their appointments. They only have a finite period of time of which to provide care and that's very important, so at a minimum for prenatal. And I'd also like to do Wick because most people who are in the Prenatal Program are also on Wick. I'd like to be able to identify a spot in the Bay Shore Community, so those patients can stay local and get those very urgent services. There may be some funding that we can get from Wick to help with some temporary rental if we have to, because Wick Funding includes rental funding. So that's something that we are exploring right now. Do you have a question?

CHAIRPERSON FIELDS:

No, go ahead.

DR. BRADLEY:

I know you had a question about the bus route and we called Suffolk Transportation. It would be intended of getting some type of shuttle bus, because as Jay Zuckerman said, there was a drop in compliance when we closed the first time. And there is a bus that goes from Touro to Brentwood to Central Islip. So we said what about -- we explored providing tokens and we can purchase tokens for Health Center employees. We actually get them made up for ourselves and when we give them out, if they use them, then we pay for them. If they don't ever use them, we don't have to pay for them. So that, I think, will work well, if we can let people know about the bus. Now, the

buses run about every half hour during peak times and up to forty five minutes maybe a little bit longer during non-peak times. But we have the schedule. So we'd like to pursue that. We think that would work very well.

LEGISLATOR FOLEY:

How do you intend -- through the Chair, how do you intend to pursue it?

DR. BRADLEY:

Well, we're going to get the tokens. We're going to get a month supply of tokens from Social Services and after that, they spoke to us about actually cutting our own tokens, so that --

LEGISLATOR FOLEY:

How do you get it to the people that need it?

DR. BRADLEY:

Well, we've talked about a couple things. We don't have anyone at Bay Shore. So it's going to be a problem. Clearly, if they go to Brentwood or Central Islip or the new Center -- well the new Center it won't apply and their Bay Shore patient, we can give it to them when they leave their first visit. We are calling people to reschedule. So we can tell people that maybe not for your first trip but for subsequent trips, we are providing tokens, so that you can get to us.

LEGISLATOR FOLEY:

Okay, just so that I have it clear in my mind that those -- are you calling all of the clients at the Bay Shore Health Center to make them aware that they can utilize the -- receive services at the other locations?

DR. BRADLEY:

Those that had scheduled appointments, we are.

LEGISLATOR FOLEY:

All right.

DR. BRADLEY:

Which goes out probably a couple months.

LEGISLATOR FOLEY:

Pardon?

DR. BRADLEY:

Which goes out a couple months. Normally, we schedule for about the next three months, so that's quite --

LEGISLATOR FOLEY:

All right but as we speak now? Are efforts being made through telephone, persons with their telephone to make them aware that these bus tokens are available?

DR. BRADLEY:

We just found this out yesterday. We will.

LEGISLATOR FOLEY:

All right. Now, for those who haven't -- the real problem is not for those who made the calls for schedules. I mean, they're staying in the system. It's all those who just simply aren't making the calls aren't showing up. But you know that through your records that they are clients of the Bay Shore Health Center. It's either the Hospital or the Health Center. What will be done to reach out to those folks to make them aware that yes, there's a closure but there are tokens that will be available for you to use, so that it won't cost you any more money to go to the -- how are you reaching those folks?

DR. BRADLEY:

I --

LEGISLATOR FOLEY:

What's the plan for that?

DR. BRADLEY:

I don't know what the plan is for that. What I can say --

LEGISLATOR FOLEY:

Can we ask Mr. Zuckerman to step forward? I know he is the Administrator but you know, how do we intend to -- since now three weeks that the decisions been made to permanently close Bay Shore. I'm sure these things have been discussed.

MR. ZUCKERMAN:

Sure, very simple. We are -- we have a listing and labels of all the Bay Shore Family Health Center patients. We are going to communicate with them about the new hours and we can also add to that the access that would be afforded by good tokens.

LEGISLATOR FOLEY:

Sounds good.

MR. ZUCKERMAN:

So those are some things that we can do and probably that can be accomplished within the next week or ten days.

LEGISLATOR FOLEY:

Very good. Very good.

CHAIRPERSON FIELDS:

Can I just ask? It's a good point if a patient needs to get to Brentwood and they can't get there and they need a token. Where would they be able to pick up a token? Could they pick it up at Southside Hospital or does the Health Department have something close by or --

LEGISLATOR FOLEY:

What they're saying is they want to get to the health -- after that first visit at the Health Center, they'll have the tokens there.

DR. BRADLEY:

Right.

LEGISLATOR FOLEY:

So they'll have to pay for the first bus ride but after that they'll have the tokens?

DR. BRADLEY:

Right.

LEGISLATOR FOLEY:

Right?

DR. BRADLEY:

The other thing that we're exploring, I don't know if it's going to work out, is we have offices at 5 Shore Lane in Bay Shore. I don't know if we can use that for distribution.

LEGISLATOR FOLEY:

Why not?

CHAIRPERSON FIELDS:

How many --

LEGISLATOR FOLEY:

Sure you can.

CHAIRPERSON FIELDS:

How many could there be?

DR. BRADLEY:

How many?

CHAIRPERSON FIELDS:

Tokens that you would need? I mean, some people probably have the ability to just drive.

DR. BRADLEY:

Right. We estimated that we would get about nine hundred for the first month and then see what happens.

LEGISLATOR FOLEY:

Five Shore Drive? What's the -- through the Chair?

CHAIRPERSON FIELDS:

Shore Lane.

LEGISLATOR FOLEY:

What's at Shore Lane?

DR. BRADLEY:

Public Health Nursing.

LEGISLATOR FOLEY:

There shouldn't even be a question about it. I mean, if the Commissioner so directs, then you know the department has to do it.

DR. BRADLEY:

But the -- well --

LEGISLATOR FOLEY:

Right?

DR. BRADLEY:

One issue is they have to get there.

CHAIRPERSON BRADLEY:

But that spot is two blocks away.

LEGISLATOR FOLEY:

Right.

CHAIRPERSON BRADLEY:

So if they get -- how do they get there? Do they get a bus? If they can get there they could probably --

LEGISLATOR FOLEY:

Well, I think the point --

CHAIRPERSON FIELDS:

Actually, you know what? It's not two blocks away. Shore Lane turns into Fourth Avenue.

LEGISLATOR FOLEY:

Right.

CHAIRPERSON FIELDS:

And Fourth Avenue is for the --

LEGISLATOR FOLEY:

Well, it's the Shore Road.

DR. BRADLEY:

So that might be for those people that really can't get there the first time, that may be an option for them.

LEGISLATOR FOLEY:

Then that can also be included in the letter --

DR. BRADLEY:

They're walkers.

LEGISLATOR FOLEY:

That is sent out by the hospital. In fact, that they can also access it direct with Shore Lane. There's another follow-up.

CHAIRPERSON FIELDS:

So let me just -- I'm sorry. I'm really stuck on this, because I got calls from the physicians in the Brentwood Health Center telling me that people were dangerously close to having strokes and going into diabetic acidosis because they could not get to the Brentwood Health Center. And that's a big concern to me that, you know, if you're saying oh well, they can take the first bus ride to get there, I don't agree. I think that they should be told when they try to make the telephone call for the appointment that they can go to Shore Lane, get the token and then there is a bus stop, an actual physical bus stop right at the Touro.

LEGISLATOR FOLEY:

Yes, it should include in the letter that where the bus stop is.

CHAIRPERSON FIELDS:

Right.

LEGISLATOR FOLEY:

Absolutely.

CHAIRPERSON FIELDS:

And this way, they do not have to pay for their own bus ride, the first primary bus trip.

DR. BRADLEY:

The only issue about public health nursing is usually they're all in the field. This maybe one secretary whose left back and sometimes. So we have to be --

CHAIRPERSON FIELDS:

How about somebody that is in the Health Department that didn't -- couldn't get over to Brentwood that could be stationed there?

LEGISLATOR FOLEY:

That's right.

DR. BRADLEY:

We'll look into it.

LEGISLATOR FOLEY:

Good. Just as one other follow-up Madam Chair, if I may? You mentioned about the ongoing problems with the air? What experts have we either hired or what experts have gone into the building to try to determine what the problems are?

DR. BRADLEY:

Well --

LEGISLATOR FOLEY:

Has it been all in-house or we used others besides?

DR. BRADLEY:

Both the Union and Southside have contracted with environmental firms who have come in. We have used our own public and environmental health lab and we've also used some consulting labs for certain things that we couldn't test for. We've now asked NIOSH, the National Institute of Occupational Safety and Health to come in and do an assessment of what we have here because we are confused. We don't know what the cause of the illnesses are.

CHAIRPERSON FIELDS:

You're also --

DR. BRADLEY:

We also consulted with the State Health Department.

CHAIRPERSON FIELDS:

And you also reached out to EPA?

DR. BRADLEY:

Yes.

CHAIRPERSON FIELDS:

And have they given you an answer of when they could get somebody there?

DR. BRADLEY:

No.

LEGISLATOR FOLEY:

Just -- I know that through the Boces Supervisory Districts, they have on staff, some very good experts in the area of sick building syndrome. And they have professionals, who on a regular basis, follow-up on complaints made in a variety of school buildings. Whether they are their own or a school district buildings. So I would suggest that to reach out to Boces --

DR. BRADLEY:

At Boces East?

LEGISLATOR FOLEY:

It's now called, it's not Boces East anymore, it's Boces Two.

DR. BRADLEY:

Boces Two.

LEGISLATOR FOLEY:

You can speak to Boces Two or even with Boces One. Boces Two, Gary Bickson is one of the top people there, whose name really comes to mind, but there are others. Or Western Suffolk Boces. But they both have dedicated professionals in the area of sick building syndrome. So it may also help lend some light on this. They've been able to determine or say to diagnose and then to at least control, if not cure, some of the problems in some of the buildings that they have investigated. So let's not leave any stone unturned. How do we intend to accelerate -- not and this should all be done on a twin track basis. But how do we intend now to accelerate the process of finding a new Health Center?

DR. BRADLEY:

Well, I have had communications with Rich LaValle about what had gone on and the urgency of finding a new home for Bay Shore sooner than when the lease was up.

LEGISLATOR FOLEY:

Right.

DR. BRADLEY:

And actually, AnnMarie has been in contact with the Space Committee and has actually started going out and looking at some proposed sites.

MS. CARBONETTO:

There was eight proposed sites they gave us. AnnMarie Carbonetto, the Health Department. There were eight sites that Terry Allar gave us. We looked at all eight and we eliminated four of them. One was in Great River and one

was --

LEGISLATOR FOLEY:

Wherever.

MS. CARBONETTO:

Yes. So we're down to four sites that we're going to visit, I believe, tomorrow.

LEGISLATOR FOLEY:

Okay.

CHAIRPERSON FIELDS:

Where are those located?

MS. CARBONETTO:

Also, I asked her about a site that Southside had given to me. So I wanted her to contact the owner of that building, so I can include that site too.

CHAIRPERSON FIELDS:

The four sites, are they all in Bay Shore?

MS. CARBONETTO:

All in Bay Shore.

LEGISLATOR FOLEY:

Just through the Chair --

CHAIRPERSON FIELDS:

Wait. Can she just finish? That she has the four sites?

LEGISLATOR FOLEY:

Yes.

CHAIRPERSON FIELDS:

You're going to visit them tomorrow and then what?

LEGISLATOR FOLEY:

That's what I was anticipating that, okay?

MS. CARBONETTO:

I'm going to ask if I can include that fifth site that --

LEGISLATOR FOLEY:

Fine, fine.

MS. CARBONETTO:

Gave me. I may not be able to visit tomorrow, sometime next week. Then we're going to bring that to the Space Committee.

LEGISLATOR FOLEY:

Yes, being a member of the Space Committee, I know the Space Committee. I think it's the final front here. But instead of having our next regularly scheduled meeting, why don't you request from the Commissioner's Office that we have -- would it suit the purposes of all involved that we would have a Space Management Meeting earlier than later?

MS. CARBONETTO:

The next meeting is Thursday.

LEGISLATOR FOLEY:

Is this Thursday?

MS. CARBONETTO:

No, not this Thursday, no.

LEGISLATOR FOLEY:

A week from Thursday?

MS. CARBONETTO:

Yes. Which would be nice if I could see that last site on Monday. Then I'd have all the information for next Thursday.

LEGISLATOR FOLEY:

Is it the same time as our Health Committee Budget Meeting?

MS. CARBONETTO:

It's in the afternoon.

LEGISLATOR FOLEY:

Because we're at one o'clock. Space Management is at ten o'clock, right? Okay. So by next week, you'll have a pretty good idea of where things stand?

MS. CARBONETTO:

Um-um.

LEGISLATOR FOLEY:

Good. Okay. Thank you.

CHAIRPERSON FIELDS:

Can we get a report at the Health Budget Committee Meeting on how you made out at that Space Management or Space Committee?

LEGISLATOR FOLEY:

Okay, thank you.

CHAIRPERSON FIELDS:

That's it. Did you? Okay, so then I'll make a motion to adjourn?

LEGISLATOR FOLEY:

I think what we have to -- some will leave but I to ask the question because some have called me about anthrax, about the County's response to it. I had, at least, one person call me that there was an anthrax scare in the Riverhead Health Center. If you could just fill us in on these things?

DR. BRADLEY:

Sure, there have been several anthrax threats throughout the County. The responses -- really the Police who make the initial visit to the site, to do an investigation and they will call in arson and emergency services unit as indicated. They are frequently calling the Health Department in -- they can get us after hours through FRES or during the day, they can just call our offices to deal with the clinical/public health issues with the people on site.

I can speak for the Police to say that the vast majority of the threats have not been deemed credible and therefore, have not been referred on for testing. Most of what has been found has been a white powdery substance in an envelope that did not get mailed. The criteria that the Federal Government, the CDC, the FBI looking at it said it's a mailed substance. That there is a threat associated with some type of written threat and that it's -- a likely source of receiving such a threat and that's difficult to say and that could change from day to day.

The substance that was found in Riverhead was an envelope with a white powder that was not mailed. That was found in some files. That it was taken out and there was some dispersal. So the Police were called in and in this circumstance, it wasn't County Police, it was the East End Police. So the policy might have swayed a little bit from the way that the normal Suffolk County Police would respond. So they responded and kind of after the fact, Suffolk County got involved. We got involved and then the Arson Squad got involved. But again, it was thought not to be a

credible threat. Our staff was out there talking with people and I believe we're going out today with a sanitarian nurse to talk to the employees in the building.

LEGISLATOR FOLEY:

All right, there's two questions arise from that. Number one, has anyone tested what was in the envelope?

DR. BRADLEY:

The testing can only be done in Wadsworth and we cannot send specimens and the Police cannot send specimens.

LEGISLATOR FOLEY:

Who send the specimens?

DR. BRADLEY:

The only one that can send specimens are the FBI and the FBI did not deem this a credible threat.

LEGISLATOR FOLEY:

Well, did we request them to deem it as a threat?

DR. BRADLEY:

We have requested them on most of these and the FBI's feeling is, is that they're not credible. This is one of many that we get called to. We got yesterday, it was the Central Islip Post Office and again, it was deemed not a credible threat.

LEGISLATOR FOLEY:

So even if there's some powdery substance, people to this day, don't know whether or not it was or was not anthrax?

DR. BRADLEY:

Right.

LEGISLATOR FOLEY:

But because the FBI deals that as not a credible threat?

DR. BRADLEY:

Right.

LEGISLATOR FOLEY:

Now again, just to clear in my own mind. Are you telling us that the Health Department had requested of the FBI to deem it a credible threat?

DR. BRADLEY:

Well, the --

LEGISLATOR FOLEY:

Did you ask for the --

DR. BRADLEY:

No, no, you see we're not allowed. They don't want to hear from us. It's the Police. But we didn't think it was a credible threat, because it wasn't a mailed envelope. So you know those are the criteria we have to look at.

LEGISLATOR FOLEY:

All right. So let me ask the question this way? From a perspective of those who work in the building? Did or did not the Health Department request for the Police or request the FBI to take this envelope, to test it, in order to assure County employees in that building that this was not anthrax? Was that formal request made by the Health Department?

DR. BRADLEY:

I don't believe so.

LEGISLATOR FOLEY:

And why not?

DR. BRADLEY:

Because we're going on the same -- let me back up.

LEGISLATOR FOLEY:

Sure.

DR. BRADLEY:

When these started, our assumption was the Police were taking them and they were going to be doing testing on them.

LEGISLATOR FOLEY:

Right.

DR. BRADLEY:

It became clear that the FBI was not processing these and --

LEGISLATOR FOLEY:

Can we --

DR. BRADLEY:

Part of it was due to the FBI's criteria for evaluating these, knowing that the vast majority of these are hoaxes. And the other is the lab capability in Wadsworth, which they do not have the capabilities currently to test all of these white substances that are found.

LEGISLATOR FOLEY:

Why are they the only lab? There's no private lab that does this?

DR. BRADLEY:

No.

LEGISLATOR FOLEY:

They're the only one that does it. All right, notwithstanding the Federal Government's inability to test all the potential, let's say envelopes here. What's the protocol now? Between the Health Department, the Police Department and in this case, the Town Police out East to try to have it a more structured, if you will, response to this?

DR. BRADLEY:

After yesterday's incident and there had been dialogues between all parties prior to the this. But after yesterday's incident, the Suffolk County Police reached out to the East End Police to discuss with them how these hoaxes, threats are being handled. So that was done after that incident.

LEGISLATOR FOLEY:

There's a discussion but from that discussion has it developed a written protocol as to how each -- because knowing in the particular area of public safety and public health, many times when things of a particular sensitive nature, it's not just discussions because of the seriousness of it. It's put down on paper as to what the written protocol will be for all the different departments and levels of government and how they're going to respond. Is there a written protocol on how to respond to this?

DR. BRADLEY:

Yes, there is.

LEGISLATOR FOLEY:

There is. Could you share --?

DR. BRADLEY:

There had been.

LEGISLATOR FOLEY:

There had been but --

DR. BRADLEY:

I had not been a part of the discussion with the FBI and Police.

LEGISLATOR FOLEY:

I understand that.

DR. BRADLEY:

So I can't comment on that.

LEGISLATOR FOLEY:

So there was a written protocol but it wasn't followed the other day? Probably not. If you could give us a copy of the written protocol?

DR. BRADLEY:

Okay.

LEGISLATOR FOLEY:

Okay. Now, how can we assure, how can we assure employees, constituents in my district, constituents in other districts who are County employees that when they come across something like this that just -- how can we assure them that the department and the County will do all -- notwithstanding, what the Federal Government is telling us that we will and should -- my point is, we should insist. No matter -- Feds can say what they want to say but from our perspective, in order to have complete assurance to our County employees that my own two cents Madam Chair, is that the County should request each and every time when something like this comes up within the County, request that the substance would be tested somehow?

DR. BRADLEY:

Well, I think it's our responsibility to do some type of risk assessment. Because if we request and they comply, we're not going to get any results back. It's the same thing with the birds. If you didn't prioritize the birds, you couldn't get test results back to act on. So everyone is looking to the people at the local scene to do a risk assessment, to see how important it is to get these substances tested. I do not dialogue with the FBI. The Police dialogue with the FBI.

LEGISLATOR FOLEY:

Right.

DR. BRADLEY:

We dialogue with the Police on site.

LEGISLATOR FOLEY:

Right. Are you telling us then that even if you went down to the FBI, you just mentioned that the information wouldn't come back to us? It would not come back to us with the results?

DR. BRADLEY:

No, we're not the sender of the information. I would --

LEGISLATOR FOLEY:

Well, it would come back to the County? It would come back to the Police Department?

DR. BRADLEY:

It would come back to --

LEGISLATOR FOLEY:

Oh? Right.

DR. BRADLEY:

It would come back to the FBI.

LEGISLATOR FOLEY:

Right.

DR. BRADLEY:

And I would hope that the State Health Department would call me as the Commissioner if they had a positive in the County.

LEGISLATOR FOLEY:

Well --

DR. BRADLEY:

But I am not the sender.

LEGISLATOR FOLEY:

I understand that.

DR. BRADLEY:

They made it very clear that the FBI would receive the results because they're the submitters of the sample.

LEGISLATOR FOLEY:

I understand that. But again, through the Chair and I think it's an important point. Again, whether it's written protocol or somehow, if that information -- if you do send something, that information goes back to the State Health Department. I mean by rights, it has to come back to the -- I mean, it just begs common sense to do that. Now, does that require that you need to sit down with the Police Department and with the State Health Department and the FBI to try to work out a protocol for if, in fact, they do accept it? On how they intend to notify or who intends to notify the County? So we can -- not us -- not me but for those who live in our districts who work with the County who -- How are they going to find out? And I think that needs -- I think, by our next meeting, we need to have that kind of assurance and County employees need to have that kind of assurance. There's two problems. The first problem is that there are decisions being made locally where a number of envelopes are not being sent per the FBI's direction, I guess. I find that a problem to begin with. Number two, even if they do accept it, today we're not hearing as to how the information will come back to the origin of the problem, to tell those who are impacted, potentially impacted, about whether or not, in fact, it was anthrax. Oh my God, I would think by this -- there would be that kind of protocol.

DR. BRADLEY:

Well --

LEGISLATOR FOLEY:

Do you know when that would -- you have a lot on your plate and I appreciate that. But whether it has to come from you or from the County Executive directly and I would hope this would be taken back to him and I mean this respectfully. But these kinds of things have to be in place. So next time I get a call from a constituent, you know and they are worried about this, I have to tell them well, you know what? The County Government is not insisting that that envelope be tested.

DR. BRADLEY:

Well, I can't speak for the Police. They may be insisting --

LEGISLATOR FOLEY:

Well, see that's my point.

DR. BRADLEY:

That you need to speak to them.

LEGISLATOR FOLEY:

Again, I know you have a lot on your plate. But being that these are County Health Department workers that, you know, within the Executive Branch, there should be this again, I'll use the word, it's protocol, where a Commissioner will speak to Commissioners about their workers in each of the departments that there's a problem, a potential

problem and to work together. And the Police Department likes to pride itself with it's relationship with the FBI and we have at the very highest levels of the Police Department some former FBI officials that I would think that we should be able to put together some kind of protocol where these things can move along. And then this leads to a whole another issue why there's only one lab that does all this testing? But that's, you know -- let me ask this question through the Chair? Because again, these things generate as we speak. Even if we have local labs that can't determine anthrax, could some of these substances be given to other labs that could show it to be something else? That we need to go to the Federal Government to find out what's in that envelope?

DR. BRADLEY:

The State Health Department told us yesterday that they are going to be increasing the hours of Wadsworth to a twenty four-hour operation.

LEGISLATOR FOLEY:

Wadsworth is where?

DR. BRADLEY:

I'm sorry, Wadsworth is the State Lab in Albany.

LEGISLATOR FOLEY:

Oh, it's a State Lab.

DR. BRADLEY:

For testing.

LEGISLATOR FOLEY:

Okay, fine.

DR. BRADLEY:

That they are expanding their hours, so that they can do more samples.

LEGISLATOR FOLEY:

All right, so this is the State Health Department?

DR. BRADLEY:

Yes, it's a State Health Department.

LEGISLATOR FOLEY:

All right, so the FBI can or cannot tell the State Health Department what to do with an envelope, correct? Why would this go through the FBI?

DR. BRADLEY:

Because --

LEGISLATOR FOLEY:

And then go back --

DR. BRADLEY:

Because --

LEGISLATOR FOLEY:

Let me finish? Why we go to the FBI and then go back to a State Governmental Lab? Why can't through -- since you are the local agent for the State Health Department, why can't it go from the County Health Department to the State Health Department to have it tested?

DR. BRADLEY:

Because they won't do it. I've asked them on conference calls --

LEGISLATOR FOLEY:

Who won't do it?

DR. BRADLEY:

They will not do it.

LEGISLATOR FOLEY:

Who won't do it?

DR. BRADLEY:

The State Health Department will not take samples from anyone other than the FBI. Now, we have been working with them. All the Counties have been working with them to develop a process, so that on a case by case basis, if a County Commissioner feels it's important to do testing that we can get some in for testing. We don't have that yet but we're working on that.

LEGISLATOR FOLEY:

Why is it now a --

DR. BRADLEY:

I can't --

LEGISLATOR FOLEY:

I'm not putting the onus on you. I'm putting the onus on the State now and understand this whole line of questioning isn't about you. It's about the State, okay! Why is it taking this long for them to develop this protocol when there's been this long established relationship between County Health Departments and the State Health Department in so many other areas?

DR. BRADLEY:

Because they're overwhelmed right now. So they are triaging. They're using the FBI to do that triaging. They're overwhelmed with samples. So they're using the FBI to triage.

LEGISLATOR FOLEY:

Overwhelmed with samples from all --

DR. BRADLEY:

Across the State.

LEGISLATOR FOLEY:

Across the State.

DR. BRADLEY:

Mainly from the city.

LEGISLATOR FOLEY:

Mainly from the city. They are overwhelmed. When would we have some assurance? When can you tell us -- when do you think you could tell us about this other process where the -- through your intervention? To the local County Health Commissioners intervention that a sample could be tested by the State?

DR. BRADLEY:

Well, we've been having daily conference calls. I might know something every day -- but I don't know yet. They haven't -- they're working on it with the State and it's not just Suffolk County.

LEGISLATOR FOLEY:

I understand that.

DR. BRADLEY:

Every other County in the State is having the same issues.

LEGISLATOR FOLEY:

I'm sure that's the case. But out of how many other County Health Centers have had an envelope with powder in it?

DR. BRADLEY:

They had episodes with powder on school buses.

LEGISLATOR FOLEY:

I understand that.

DR. BRADLEY:

I mean every --

LEGISLATOR FOLEY:

I understand that. But I'm looking at it from a perspective of when I get calls from constituents who work in County Government and not even constituents. They just live in the County. They know enough to call. They tell me they have concerns and you know -- so we have to ask these questions. And now by this series of questions, I think, we have some more -- a better understanding of the complexities that you have to deal with. But at the same time, now what we can do and what I intend to do is to speak directly with the County Executive or his office. And I hope the Chair would tell him that he needs to put together his protocol, where when you call the Health Department, the County State Health Department, especially when it deals with County workers that there should be this protocol that you can send it right up. Thank you.

CHAIRPERSON FIELDS:

I just have one other question about anthrax and that is, do you feel that all of the private physicians are well versed on symptoms of anthrax and how to determine whether or not there may be a problem? And do you think that it would be better to educate the public about the symptoms or do you think that would cause an even deeper problem of people thinking that they have anthrax?

DR. BRADLEY:

Well, in terms, of the providers. We have been sending out information to the providers, to the hospitals, about three thousand providers in the County. And although we've requested a current mailing list, we haven't received it from the State yet. The State was going to send a "Dear Doctor" letter out earlier in the week. It hasn't done it yet. They have promised now that they will send it out tomorrow. So they will be sending information to all providers. But the majority of providers are somehow hooked into hospitals. So we have used the hospitals and asked them to give out the information to their providers.

I also went and spoke at the Medical Society and handed out information and whenever we get a provider on the phone, we send them out packets of information. So I think the vast majority of them now understand what they need to be concerned about and it's not just cutaneous anthrax or inhalation. It's a whole spectrum of people, larger numbers of people coming in who are ill and it's unfortunate that it's hitting right around flu season and we have another year with the shortage of flu vaccine. I don't think it's appropriate to educate individuals about the symptoms of anthrax but I think it's important to tell people that if they were at one of these -- where there was white powder and they subsequently developed an illness that -- and I have been telling them they should go to the Emergency Room, not even to go to a provider. I think they should go right to the Emergency Room. So that, we have been doing.

CHAIRPERSON FIELDS:

Okay. I think this is the beginning of a much larger problem but I appreciate your answers and your responses and the meeting is adjourned.

(The meeting was adjourned at 12:00 P.M.)